

ST-3C (Rev. 1/1/96) COMMERCIAL MOTOR VEHICLE SUPPLEMENT TO THE TEXAS PEACE OFFICER'S ACCIDENT REPORT

ACCIDENT INFORMATION		LOC NO. _____
(1) COUNTY _____	(2) CITY OR TOWN _____	DO NOT WRITE IN THIS SPACE
(3) ROAD ON WHICH ACCIDENT OCCURRED _____ <small>BLOCK NO. STREET OR ROAD NAME ROUTE NUMBER</small>		
(4) DATE OF ACCIDENT _____ 19__	(5) DAY OF WEEK _____	MCS NO. _____
		(6) HOUR _____ <input type="checkbox"/> AM (IF EXACTLY NOON OR MIDNIGHT, SO STATE) <input type="checkbox"/> PM

DRIVER INFORMATION		
(7) NAME _____ <small>LAST FIRST MIDDLE</small>	(8) DRIVER'S LICENSE _____ <small>STATE NUMBER</small>	
(9) DRIVER'S LICENSE CLASS/TYPE _____ <small>CDL <input type="checkbox"/> YES <input type="checkbox"/> NO</small>	(10) RESTRICTIONS _____	(11) ENDORSEMENTS _____
		(12) DRIVER'S DOB _____ <small>MONTH DAY YEAR</small>

CARRIER INFORMATION		(14) NAME SOURCE _____
(13) VEHICLE OPERATION <input type="checkbox"/> INTERSTATE COMMERCE <input type="checkbox"/> INTRASTATE COMMERCE		SHIPPING PAPERS <input type="checkbox"/> DRIVER <input type="checkbox"/>
(15) CARRIER'S CORPORATE NAME _____		LOG BOOK <input type="checkbox"/> SIDE OF VEHICLE <input type="checkbox"/> OTHER <input type="checkbox"/>
(16) CARRIER'S PRIMARY ADDRESS _____ <small>NUMBER STREET CITY STATE ZIP</small>		
(17) CARRIER ID TYPE: <input type="checkbox"/> ICC <input type="checkbox"/> DOT <input type="checkbox"/> RRC <input type="checkbox"/> OTHER _____ <input type="checkbox"/> NONE		(18) CARRIER ID NO. _____

MOTOR VEHICLE INFORMATION	(20) LICENSE PLATE _____ <small>YEAR STATE NUMBER</small>	(22) TOTAL NUMBER OF AXLES _____	(23) TOTAL NUMBER OF TIRES _____	(24) AIR BRAKES <input type="checkbox"/> YES <input type="checkbox"/> NO
<input type="checkbox"/> (19) UNIT NUMBER ON ST-3	(21) GROSS VEHICLE WEIGHT RATING _____ REGISTERED GROSS VEHICLE WEIGHT _____			

(25) VEHICLE TYPE <input type="checkbox"/> 1-TRUCK <input type="checkbox"/> 2-TRUCK TRACTOR <input type="checkbox"/> 3-VAN <input type="checkbox"/> 4-BUS <input type="checkbox"/> 5-AUTOMOBILE <input type="checkbox"/> 6-OTHER	(26) CARGO BODY STYLE <input type="checkbox"/> 1-VAN/ENCLOSED BOX <input type="checkbox"/> 2-DUMP <input type="checkbox"/> 3-CARGO TANK <input type="checkbox"/> 4-GARBAGE/REFUSE <input type="checkbox"/> 5-SPECIALIZED <input type="checkbox"/> 6-CEMENT MIXER <input type="checkbox"/> 7-FLATBED <input type="checkbox"/> 8-NA (ie, TRUCK TRACTOR, AUTO OR BUS) <input type="checkbox"/> 9-OTHER	(27) HAZARDOUS MATERIALS TRANSPORTING HAZARDOUS MATERIALS <input type="checkbox"/> YES <input type="checkbox"/> NO 1. CLASS _____ ID No. _____ 2. CLASS _____ ID No. _____ 3. CLASS _____ ID No. _____ HAZARDOUS MATERIALS RELEASED <input type="checkbox"/> YES <input type="checkbox"/> NO
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(28) VEHICLE USE <input type="checkbox"/> 1-FARM <input type="checkbox"/> 2-MILITARY <input type="checkbox"/> 3-RECREATIONAL <input type="checkbox"/> 4-FIREFIGHTER <input type="checkbox"/> 5-SCHOOL BUS <input type="checkbox"/> 6-TRANSPORT PERSONAL PROPERTY <input type="checkbox"/> 7-TRANSPORT SICK OR INJURED OR HUMAN CORPSES <input type="checkbox"/> 8-PRIVATE TRANSPORTATION OF PASSENGERS <input type="checkbox"/> 9-OTHER	(29) CARGO TYPE <input type="checkbox"/> 1-GENERAL FREIGHT <input type="checkbox"/> 2-GAS IN BULK <input type="checkbox"/> 3-LIQUIDS IN BULK <input type="checkbox"/> 4-SOLIDS IN BULK <input type="checkbox"/> 5-PRODUCE <input type="checkbox"/> 6-AGRICULTURAL PRODUCTS <input type="checkbox"/> 7-LIVESTOCK <input type="checkbox"/> 8-ROCK, DIRT, SAND, GRAVEL, ETC. <input type="checkbox"/> 9-MACHINERY <input type="checkbox"/> 10-CONSTRUCTION MATERIAL <input type="checkbox"/> 11-DAIRY PRODUCTS <input type="checkbox"/> 12-OTHER (SPECIFY) _____ <input type="checkbox"/> 13-EMPTY <input type="checkbox"/> 14-NOT APPLICABLE (UNIT NOT EQUIPPED FOR CARGO)
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(30) _____ IF THIS VEHICLE TYPE IS A BUS, SHOW THE NUMBER OF PASSENGERS THE BUS IS EQUIPPED TO CARRY (INCLUDING THE DRIVER)

(31) _____ SHOW THE NUMBER OF TRAILER(S) /SEMI-TRAILER(S) THIS MOTOR VEHICLE IS TOWING. COMPLETE TRAILER INFORMATION BELOW AS APPLICABLE

TRAILER NUMBER 1 INFORMATION (32) LICENSE PLATE _____ <small>YEAR STATE NUMBER</small> (33) GROSS VEHICLE WEIGHT RATING _____ REGISTERED GROSS VEHICLE WEIGHT _____	(34) TRAILER TYPE <input type="checkbox"/> 1-FULL TRAILER <input type="checkbox"/> 2-SEMI-TRAILER <input type="checkbox"/> 3-POLE TRAILER	(35) HAZARDOUS MATERIALS TRANSPORTING HAZARDOUS MATERIALS <input type="checkbox"/> YES <input type="checkbox"/> NO 1. CLASS _____ ID No. _____ 2. CLASS _____ ID No. _____ 3. CLASS _____ ID No. _____ HAZARDOUS MATERIALS RELEASED <input type="checkbox"/> YES <input type="checkbox"/> NO
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(36) TRAILER CARGO BODY STYLE <input type="checkbox"/> 1-VAN/ENCLOSED BOX <input type="checkbox"/> 2-DUMP <input type="checkbox"/> 3-CARGO TANK <input type="checkbox"/> 4-LIVESTOCK <input type="checkbox"/> 5-SPECIALIZED <input type="checkbox"/> 6-FLATBED <input type="checkbox"/> 7-AUTO-TRANSPORT <input type="checkbox"/> 8-OTHER	(37) CARGO TYPE <input type="checkbox"/> 1-GENERAL FREIGHT <input type="checkbox"/> 2-GAS IN BULK <input type="checkbox"/> 3-LIQUID IN BULK <input type="checkbox"/> 4-SOLIDS IN BULK <input type="checkbox"/> 5-PRODUCE <input type="checkbox"/> 6-AGRICULTURAL PRODUCTS <input type="checkbox"/> 7-LIVESTOCK <input type="checkbox"/> 8-ROCK, DIRT, SAND, GRAVEL, ETC. <input type="checkbox"/> 9-MACHINERY <input type="checkbox"/> 10-CONSTRUCTION MATERIAL	11-DAIRY PRODUCTS <input type="checkbox"/> 12-OTHER (Specify) _____ <input type="checkbox"/> 13-EMPTY <input type="checkbox"/> 14-NOT APPLICABLE (UNIT NOT EQUIPPED FOR CARGO)
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TRAILER NUMBER 2 INFORMATION (38) LICENSE PLATE _____ <small>YEAR STATE NUMBER</small> (39) GROSS VEHICLE WEIGHT RATING _____ REGISTERED GROSS VEHICLE WEIGHT _____	(40) TRAILER TYPE <input type="checkbox"/> 1-FULL TRAILER <input type="checkbox"/> 2-SEMI-TRAILER <input type="checkbox"/> 3-POLE TRAILER	(41) HAZARDOUS MATERIALS TRANSPORTING HAZARDOUS MATERIALS <input type="checkbox"/> YES <input type="checkbox"/> NO 1. CLASS _____ ID No. _____ 2. CLASS _____ ID No. _____ 3. CLASS _____ ID No. _____ HAZARDOUS MATERIALS RELEASED <input type="checkbox"/> YES <input type="checkbox"/> NO
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(42) TRAILER CARGO BODY STYLE <input type="checkbox"/> 1-VAN/ENCLOSED BOX <input type="checkbox"/> 2-DUMP <input type="checkbox"/> 3-CARGO TANK <input type="checkbox"/> 4-LIVESTOCK <input type="checkbox"/> 5-SPECIALIZED <input type="checkbox"/> 6-FLATBED <input type="checkbox"/> 7-AUTO-TRANSPORT <input type="checkbox"/> 8-OTHER	(43) CARGO TYPE <input type="checkbox"/> 1-GENERAL FREIGHT <input type="checkbox"/> 2-GAS IN BULK <input type="checkbox"/> 3-LIQUID IN BULK <input type="checkbox"/> 4-SOLIDS IN BULK <input type="checkbox"/> 5-PRODUCE <input type="checkbox"/> 6-AGRICULTURAL PRODUCTS <input type="checkbox"/> 7-LIVESTOCK <input type="checkbox"/> 8-ROCK, DIRT, SAND, GRAVEL, ETC. <input type="checkbox"/> 9-MACHINERY <input type="checkbox"/> 10-CONSTRUCTION MATERIAL	11-DAIRY PRODUCTS <input type="checkbox"/> 12-OTHER (Specify) _____ <input type="checkbox"/> 13-EMPTY <input type="checkbox"/> 14-NOT APPLICABLE (UNIT NOT EQUIPPED FOR CARGO)
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(44) SIGNATURE _____ DATE THIS _____